

Proposal for Use of a Commissioned Officer 2003

The National Health Service Corps assigns a limited number of Public Health Service Commissioned Officer clinicians to serve at primary and oral health care sites throughout the country. Sites must be within Health Professional Shortage Areas. Please use this form to describe why and how your organization hopes to best use, evaluate and sustain the services of a commissioned officer. Instructions for completing this form are included at the end of this document.

Requesting Organization and Desired Officer Information		
Name of Organization		Discipline of Desired Officer (Family Physician or Dentist)
Contact Person		Proposed Starting Date
Telephone Number	Fax Number (if available)	Email Address of Requesting Organization (if available)
Address (including Zip Code) and Telephone of Site Where Officer Will Be Assigned		

The following four sections are required for consideration of your proposal.

Please stay within the confines of the spaces provided, using a size 12 or greater font. Do not attach extra pages.

A. Statement of Need (What needs to be done?) – 30 points

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B. Program Description (How will the CO be used?) – 30 points

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C. Evaluation Plan (How will the CO be evaluated?) – 30 points

D. Budget Narrative (How will the CO's services be sustained?) – 10 points

Instructions for Completing the *Proposal for Use of a Commissioned Officer 2003* form

Each proposal is given careful consideration. The proposal contains four sections, each of which is evaluated and scored. The four sections with their respective highest possible scores include the following:

A. Statement of Need (What needs to be done?) – 30 points

A statement of need describes the circumstances at a site, which explain why a commissioned officer is required. The statement should describe a health care need in a community or population that can be remedied. It should include both a description of the targeted service area, and a description of the health status of the populations served. The statement should show that the need for a commissioned officer exists within the context of an already functioning health care system that strives to systematically address the needs of its community.

B. Program Description (How will the CO be used?) – 30 points

The program description specifies the anticipated program development and system changes the commissioned officer will be asked to make. This description should clearly state the commissioned officer's specific objectives, including a time frame according to which milestones and final outcomes will be measured. Care should also be taken to describe the local support, linkages, and partnerships needed to implement and sustain the proposed program.

The program description should include a plan for those times when the commissioned officer will be away from the site in training for, or responding to, regional or national medical emergencies.

Keeping in mind that the officer will be available to the program, in most cases, for a 3-year period, the program description should also include a statement describing how the changes initiated by the commissioned officer will be sustained after the assignment ends.

C. Evaluation Plan (How will the CO be evaluated?) – 30 points

The evaluation plan is a realistic plan for the tracking of progress and the collection of data on the process, activities and outcomes of the project(s) on which the commissioned officer has worked. This plan should be clearly described.

D. Budget Narrative (How will the services of the CO be sustained?) – 10 points

The budget narrative relays a budget/financial plan, which should ensure appropriate utilization of the commissioned officer, as well as other staff and resources. It should project the likelihood that the program will remain viable beyond the 3-year period of assignment, and how it will be supported. The extent to which the site has identified and committed resources towards the achievement of the commissioned officer's specific objectives will be strongly considered.

Application process

Completed proposals/applications should be addressed to: National Health Service Corps, 5600 Fishers Lane, Room 8 A-55, Rockville, MD 20857. These proposals must be postmarked on or before the deadline date of September 30, 2003. Proposals/applications postmarked after September 30, 2003, or sent to any address other than the one specified above, will be returned to the applicant and not be considered. Applicants should request a legibly dated U.S. Postal Service postmark or obtain a legibly dated receipt from a commercial carrier or U.S. Postal Service. Private metered postmarks shall not be acceptable as proof of timely mailing.

Any questions should be directed to the NHSC toll-free help line at 1-800-221-9393.